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Practitioner's Docket No.: 1413.03

PATENTS 12-16-02

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Israel Morejon et al.
5 Serial No.: 10/065,635
Filing Date: 11/05/2002
10 For: Discrete Multitone Modem
Initialization System and
Method

Examiner: Unassigned
Art Unit: Unassigned

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Box Non-Fee Amendment
15 Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

A preliminary amendment under 37 CFR 1.115(a) is requested. The above-identified
20 patent application is amended a first time as follows:

PRELIMINARY AMENDMENT
(37 C.F.R. § 1.115(a))

IN THE SPECIFICATION:

25 Please re-write the following paragraph of the specification as follows, in accordance
with 37 C.F.R. 1.121(a)(1). :

Paragraph [0002]:

AI This application is a continuation-in-part of co-pending United States Patent Application
30 Serial No. 10/064,570, filed July 26,2002.

Exhibit A attached hereto indicates how the original paragraph was amended to produce
the re-written paragraph submitted herewith. Added terms are underscored and deleted terms are
bracketed.

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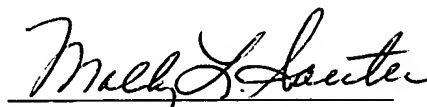
Group Art: Unassigned
Examiner: Unassigned

It is requested that this preliminary amendment be entered.

Very respectfully,

SMITH & HOPEN

By:



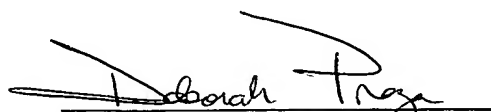
Molly L. Sauter
USPTO Reg. 46,457
Suite 220
15950 Bay Vista Drive
Clearwater, FL 33760
(727) 507-8558
Attorneys for Applicant

Dated: November 15, 2002

CERTIFICATE OF MAILING
(37 C.F.R. 1.8)

I HEREBY CERTIFY that this Preliminary Amendment, including Exhibit A, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: U.S. Receiving Office, Box Non-Fee Amendment, Assistant Commissioner for Patents, Washington, D.C. 20231 on November 15, 2002.

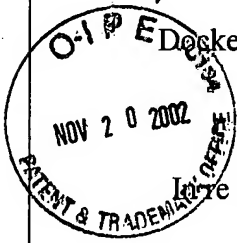
Date: November 15, 2002


Deborah Preza

Docket No. 1413.03

PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



In re Application of:
Israel Morejon et al.

Serial No.: 10/065,635

Art Unit: Unassigned

Filed: 11/05/2002

Examiner: Unassigned

For: Discrete Multitone Modem Initialization
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Assistant Commissioner for Patents
Washington, D.C. 20231

PRELIMINARY AMENDMENT TRANSMITTAL

1. Transmitted herewith is a preliminary amendment for this application.

STATUS

2. Applicants are independent inventors. A statement was already filed.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

CERTIFICATE OF MAILING
(37 C.F.R. 1.8)

I HEREBY CERTIFY that this Preliminary Amendment, including Exhibit A, is being deposited with the United States Postal Service by first class mail in an envelope addressed to: Box Non-Fee Amendment, Assistant Commissioner for Patents, Washington, D.C. 20231 on November 15, 2002.

Dated: November 15, 2002

Deborah Preza

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

| | (Col. 1) | | (Col. 2) | (Col. 3) SMALL ENTITY | | |
|--|---|-------|---------------------------------------|-----------------------|-----------|----------------|
| | Claims Remaining After Amendment | | Highest No. Previously Paid For | Present Extra | Rate | Addit. Fee |
| Total | 58 | Minus | 58 | = 0 | x \$9 = | \$0 |
| Indep. | 10 | Minus | 10 | = 0 | x \$42 = | \$0 |
| First Presentation of Multiple Dependent Claim | | | | | + \$140 = | \$0 |
| Total | | | | | | Addit. Fee \$0 |

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3,
 - ** If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 1) is less than 20, enter "20".
 - *** If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 2) is less than 3, enter "3".
- The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

No additional fee for claims is required.

FEE DEFICIENCY

5. If any additional extension and/or fee is required, charge Deposit Account No. 500745.
If any additional fee for claims is required, charge Deposit Account No. 500745.


SIGNATURE OF PRACTITIONER

Reg. No. 46,457
Tel. No.: (727) 507-8558

Molly L. Sauter
Smith & Hopen, P.A.
15950 Bay Vista Drive, Ste. 220
Clearwater, FL 33760